



*"Service with Excellence
& Integrity"*

Arkansas Department of Community Correction

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ADMINISTRATIVE DIRECTIVE: 11-01 RESIDENT MEDICAL SERVICES

TO: DEPARTMENT OF COMMUNITY CORRECTION EMPLOYEES

FROM: DAVID EBERHARD, DIRECTOR

SUPERSEDES: NONE

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APPROVED: _____ Signature on File

EFFECTIVE: JANUARY 1, 2011

- I. APPLICABILITY.** This policy applies to all providers of health care to residents and to the Department of Community Correction facility administrators and staff making referrals, working with health care providers, or affected by recommendations of health care providers.
- II. POLICY.** It shall be the policy of the Department of Community Correction (DCC) to provide accessible health care services to residents, which meet reasonable and necessary health care needs and HIPPA and other privacy standards concerning resident medical care and services.
- III. DEFINITION.**
 - A.** "Health care" refers to the variety of goods, services, personnel and procedures involved in providing the full range of prevention, evaluation and treatment of dental, medical and mental disorders.
 - B.** "Provider" refers to any health care organization, administrator, professional, paraprofessional or member of support staff, whether employed by the DCC, under contract to the DCC or paid on a fee-for-service basis, providing health care services to residents.
 - C.** "Accessible" has a range of meanings depending on the acuteness and seriousness of the health disorder, but generally means that a resident will be placed in contact with health care staff qualified to evaluate and/or treat the presenting complaint without undue delay or difficulty.
 - D.** "Reasonable and necessary" means that any treatable problem which significantly impairs the functioning of the individual, and/or presents a risk of contagion to others, and/or which is likely to worsen or cause unnecessary suffering without treatment, will be evaluated and treated according to the current community and professional standards and practices of health care.

IV. PROCESS

- A.** Each service shall be administered from within the DCC in such a way as to ensure proper care of residents, effective working relations with other divisions and staff, and program consistency with the mission and methods of the DCC.
- B.** Each administratively separate health care service shall establish policy and procedures consistent with applicable standards regulating the professional practices of that service.
- C.** Each service shall establish a staffing pattern – whether based on funded positions, contract, or fee-for-service – that ensures an adequate number of staff to make services readily available and proper credentialing to ensure quality of care.
- D.** Each service shall ensure that all residents entering the DCC are screened, their health status documented, and that referrals for treatment are made promptly when serious needs exist.
- E.** Each service shall establish procedures for resident access to necessary services that are not provided within the confines of the DCC. When transfer to another facility is required, procedure must address any impact on liberty interests and/or stigmatization.
- F.** Each service shall have policy and supporting documentation addressing issues of informed consent about procedures, the principle of least restrictive or intrusive treatment, and the right to refuse treatment.
- G.** Each service shall keep proper records of health needs and service delivery. Procedures will be written for safeguarding confidentiality and for informed consent for release of information.
- H.** Each service shall have a mechanism for handling requests and grievances in such a manner as to assure prompt attention to needs and rapid resolution of problems.
- I.** Each service shall have formal lines of communication with the DCC Center Supervisor to ensure proper notification concerning health needs, health care recommendations and incidents relating to health care services. This line of communication shall also provide for regular meetings to resolve problems and conflicts.
- J.** Medical Services shall have procedures for dealing with special needs residents, such as the aged, chronically ill, and those having severely limited perceptual or motor abilities.
- K.** Mental Health Services shall have procedures for dealing with mentally disordered, mentally challenged, brain damaged and suicidal inmates, including provisions for special needs residents requiring intensive and/or long term care.
- L.** Each service shall establish some mechanism of quality review and/or certification to ensure that the service is adequately providing for the needs of the resident population.
- M.** Each service shall provide for training of staff and inmates in disease prophylaxis, recognition of problems, response to emergency health problems, and health care programs.